

PCA – Process Psychiatric Mental Hospital Cost Report and Perform Cost Settlement Including Iowacare

Purpose: Review the cost report using desk review procedures to determine if reported costs are allowable and reasonable and calculate amount of tentative and final settlement for Psychiatric Mental Hospitals. IowaCare is no longer settled effective SFY 2010.

Identification of Roles:

1. Accounting Assistant – reviews the cost report to determine if all the necessary information was completed and received. Imports/data enters cost report. Also reviews the reported items to make sure it foots and ties out to supporting documentation.
2. Staff Accountant – performs desk review procedures to determine reasonable and allowable costs and calculates tentative and final settlement.
3. Senior Accountant – may perform desk review procedures and perform reviews.
4. Supervisor – perform review of desk review procedures and adjustments.
5. Manager – may perform review.

Performance Standards:

Perform annual desk review and IowaCare reconciliation and notify the provider and the Department of the settlement amount within 30 days of receipt of the financial and statistical report.

Path of Business Procedure:

- Step 1: Generate cost settlement report in the Medicaid Management Information System (MMIS).
- Step 2: Retrieve IAMM cost settlement report in OnBase.
- Step 3: Mail blank Cost Report, IAMM cost settlement summary report and Disproportionate Share Hospital (DSH) survey to provider.
- Step 4: Mailroom receives Cost Report and scans into On-Base. If electronic version, then disk is sent to Provider Cost Audit (PCA).
- Step 5: Postmark date of Cost Report is scanned into On-Base.
- Step 6: Receive notification from On-Base that cost report is ready for processing.
- Step 7: Receive hard copy or electronic version of Cost Report from mailroom.
- Step 8: Perform preliminary review for compliance, validity, and completion of certification statement

- Step 9: Log receipt of Cost Report in status log in Access and Iowa Medicaid Cost and Rate System (IMCARS).
- Step 10: Send "Cost Report Acknowledgment" letter to agency. Letter is located on the Provider Cost Audit share drive.
- Step 11: Cost Report information is data entered/imported into IMCARS.
- Step 12: Review Cost Report for mathematical accuracy and completeness.
- Step 13: Log support staff review complete date in status log in Access and IMCARS.
- Step 14: Perform reasonable test and make necessary adjustments to reported data to determine allowable costs.
- Step 15: Generate IAMM cost settlement report in MMIS.
- Step 16: Retrieve IAMM cost settlement report in OnBase.
- Step 17: Review permanent file and the prior year settlement and IowaCare reconciliation in provider file.
- Step 18: Receive detail claims data for both Medicaid and IowaCare from data warehouse
- Step 19: Prepare comparison of provider submitted data and MMIS data.
- Step 20: Calculate Apportionment of Inpatient Routine Service Costs for each unit by payor.
- Step 21: Prepare Computation of Inpatient Operating Cost.
- Step 22: Prepare Allocation of Inpatient Ancillary Service Costs.
- Step 23: Prepare Apportionment of Inpatient Ancillary Service for each unit by payor.
- Step 24: Calculate disproportionate share hospital specific limit.
- Step 25: Evaluate interim payments; make changes to the rate if necessary.
- Step 26: Perform final review.
- Step 27: Update interim rate and effective date in MMIS.
- Step 28: Perform IowaCare reconciliation.

Forms/Reports:

1. CMS Form 2552-96, Hospital and Healthcare Complex Cost Report.
2. Disproportionate Share Hospital Survey.
3. Cost Settlement Report Summary.
4. Cost Settlement Program.
5. Medicaid and IowaCare Reconciliation Report
6. Notice of Program Reimbursement
7. Gross Adjustment Request Form

RFP References:

Section 6.7.1.2b

Interfaces:

Medicaid Management Information System (MMIS)
IME Core Unit

Attachments:

N/A